L13000041724

(Requestor's Name)
(Address)
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COVER LETTER

TO:	Registration Se Division of Cor			
C1191 FF	DistroData.	LLC		
SUBJI	.cr:	Name of Lim	ited Liability Company	
The en	closed Articles of	Amendment and fee(s) are sub	mitted for filing.	
Please	return all correspo	ndence concerning this matter	to the following:	
		Shea Allen		
			Name of Person	
			Firm/Company	
		38 Via Largo		
			Address	
		Santa Rosa Beach, FL 324	59	
			City/State and Zip Code	
		shea@distrodata.com		
		E-mail address. (to be used for future annual report notif	ication)
For fur	ther information c	oncerning this matter, please ca	all:	
Shea A	Allen		850 6850254 at ()	
	Name of	f Person	Area Code Daytime	Telephone Number
Enclos	ed is a check for th	e following amount:		
■ \$2:	5.00 Filing Fee	☐ \$30.00 Filing Fee & Certificate of Status	☐ \$55.00 Filing Fee & Certified Copy (additional copy is enclosed)	☐ \$60,00 Filing Fee, Certificate of Status & Certified Copy (additional copy is enclosed)

MAILING ADDRESS:

Registration Section Division of Corporations P.O. Box 6327 Tallahassee, F1. 32314 STREET/COURIER ADDRESS:

Registration Section
Division of Corporations
Clifton Building
2661 Executive Center Circle
Tallahassee, FL 32301

ARTICLES OF AMENDMENT TO ARTICLES OF ORGANIZATION OF

2017 JUL 10 PM 2: 46

DistroData, LLC

(Name of the Limited Liability Compa (A Florida Limited I	ny as it now appears on our records Liability Company)	SEAHASSEE STAIL
The Articles of Organization for this Limited Liability Company Florida document number <u>L13000041724</u>	were filed on 03/19/2013	and assigned
This amendment is submitted to amend the following:		
A. If amending name, <u>enter the new name of the limited liab</u>	ility company here:	
The new name must be distinguishable and contain the words "Limited Liabi	lity Company," the designation "LLC"	" or the abbreviation "L.L.C."
Enter new principal offices address, if applicable:	5 Industrial Park Lane, Unit #10	01
(Principal office address MUST BE A STREET ADDRESS)	Destin, FL 32541	
Enter new mailing address, if applicable:	5 Industrial Park Lane, Unit #10	01
Mailing address MAY BE A POST OFFICE BOX)	Destin, FL 32541	
3. If amending the registered agent and/or registered of registered agent and/or the new registered office address here. Name of New Registered Agent: New Registered Office Address:		s, enter the name of the i
New Registered Office Address:	Enter Florida street address	· · · · · · · · · · · · · · · · · · ·
	Flo	orida
	City	Zip Code

New Registered Agent's Signature, if changing Registered Agent:

I hereby accept the appointment as registered agent and agree to act in this capacity. I further agree to comply with the provisions of all statutes relative to the proper and complete performance of my duties, and I am familiar with and accept the obligations of my position as registered agent as provided for in Chapter 605, F.S. Or, if this document is being filed to merely reflect a change in the registered office address, I hereby confirm that the limited liability company has been notified in writing of this change.

If Changing Registered Agent, Signature of New Registered Agent

If amending Authorized Person(s) authorized to manage, enter the title, name, and address of each person—being added or removed from our records:

MGR = Manager AMBR = Authorized Member

<u>Title</u>	<u>Name</u>	Address	Type of Action
MGR	Gregg Abel	14 Cambridge Ave NE	
		Fort Walton Beach, FL 32547	■ Remove
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ective date, if other than th	ic date of filing:			_ (optional)	
reffective date is listed, the date m	ust be specific and cannot	be prior to date of I	lling or more than 90 d	lays after filing.) Pursua	ant to 605,020
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record specifies a delaye he 90th day after the re	ed effective date, t cord is filed.	out not an effe	ective time, at 1	2:01 a.m. on the	e earlier o
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Filing Fee: \$25.00

Typed or printed name of signee